

lication or Docket Number

X\$18=

OR

CLAIMS AS FILED - PART I (Column 1) (Column 2) CLAIMS			עאי	10/510077			
	•		SMALI TYPE	ENTITY	OF	OTHER	
L CLAIMS			RATI	FE	Ē,	RATE	FEE
• •	NUMBER FILED	NUMBER EXTRA	BASIC	EE	OR	BASIC FEE	1111

NUMBER FILED NUMBER EXTRA TOTAL CHARGEABLE CLAIMS minus 20= INDEPENDENT CLAIMS minus 3 = MULTIPLE DEPENDENT CLAIM PRESENT

* If the difference in column 1 is less than zero, enter "0" in column 2

740=	 OR		
+145=	OR	-290=	
TOTAL	OR	TOTAL	

XS 9=

CLAIMS AS AMENDED - PART II

		(Column 1)		(Column 2)	(Column 3)
NDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
MON	Total		Minus	**	=
AME	Independent	•	Minus	***	= .
Ø	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT CLAIM	

		OTHER THAN
SMALL ENTITY	OR	SMALL ENTITY
ADDI:	7 1	ADD

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
XS 9=		OR	XS18=	:
X43=		OR	X86=	-
+145=		OR	+290=	•
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

		(Column 1)		(Column 2)_	(Column 3)
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Š	Total	*	Minus	**	=
ME	Independent	•	Minus	***	=
A					

		_		
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X43=		OR:	X86=	
+145=		OR.	+290=	•
TOTAL		OR .	TOTAL	

		(Column 1)		(Column 2)	(Column 3)	
NDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
WON	Total	•	Minus	**	=	
ME	Independent	•	Minus	***	= .	
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	•
X43=		ÖR	X86=	
+145=		OR	+290=	•
TOTAL ADDIT. FEE		OR	TOTAL	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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